HOME CONFINEMENT RULES (PASSIVE GPS) PARTICIPANT AGREEMENT

- 1. I have been placed in the Home Confinement Program with passive GPS monitoring. I agree to comply with all program rules as set forth in this agreement, and the instructions of my Pretrial Services Officer. Failure to comply with this agreement or instructions of my officer will be considered a violation of my supervision and may result in an adverse action by the Court. I agree to call my officer immediately if I have any questions about these rules or if I experience any problems with the monitoring equipment.
- 2. I understand and agree that I must follow established home, work, or other rules and approved travel routes. I understand that any deviations from my schedule or approved travel route is a violation of the conditions of my supervision. Computer printouts and maps can be used in court as proof of the violation. All of my movements will be tracked and stored as an official record. I must obtain advance permission from a Pretrial Services Officer for any deviations from my written schedule.
- 3. I will avoid any predetermined exclusion zones. These are areas that have been determined by the Court or my officer to be off-limits. If I receive an exclusion violation notice, I will leave the area immediately. I will respond immediately to all messages that are sent to my monitoring unit.
- 4. I agree to maintain telephone and electrical service in my residence at my own expense. I agree that I will not make any changes in telephone equipment or services at my residence without prior approval of my officer. I agree to provide copies of my monthly telephone and electric bill when requested by my officer.
- 5. I understand that my officer will use telephone calls and personal visits to monitor my compliance. When I am at home, I agree to promptly answer my telephone or door. If I fail to answer my telephone or door when I am supposed to be home, I will be in violation of my program restrictions.
- 6. I understand that my officer must be able to locate me at all times. If I do not have a job with a fixed location, my officer must be able to contact me by calling my employer. I also understand that jobs which do not meet these requirements are not permitted while I am under this program.
- 7. I will not deviate from my approved schedule except in an emergency. I will first try to get the permission of my officer. If this is not possible, and it is during business hours, I will contact the main telephone number to Pretrial Services (619-557-7610) and request to speak to an officer. If the call is during non-business hours, I will leave a voice mail message for my officer that includes my name, the date and time, a brief description of the emergency, and my location and destination. I will also agree to provide proof of this emergency to my officer as soon as possible.

Page 2 of 2

8.	I agree to wear a non-removable ankle transmitter and not to remove or tamper with it except in a life threatening emergency or with the prior permission of my officer.			
9.	I acknowledge receiving the bracelet (#) a will be held responsible for a understand that if I do not ret be charged for the replacement	nd Charging Stand (# .ny damage, other than urn the equipment, or o	normal wear, to t	good condition, I may
10.	will keep the portable monitoring unit with me at all times. Leaving the unit behind at ome, work, or other places will be grounds for a violation. I will insert the Miniature racking Device (MTD) into the Charging Stand when at home or as instructed by my fficer.			
11.	I agree to allow authorized personnel to inspect and maintain all equipment assigned to me while under the Home Confinement Program.			
12.	I agree to notify my officer immediately if I experience any problems with the monitoring equipment. During non-business hours, I agree to call my officer and leave a message including my name, the date and time, and the nature of the problem.			
13.	I understand that I may be ordered to pay for the daily cost of my monitoring. If so ordered, I agree to pay the costs of \$4.00 per day. I will submit payments directly to the Pretrial Services Office in the amount previously agreed upon, the first week of every month. All payments will be made via money order made out to Pro Tech Monitoring. No personal checks or cash will be accepted.			
Pretria	I acknowledge that I have red I understand I must comply I Services Officer. I further to on of supervision and the Cou	with these rules until anderstand that any vio	otherwise notified	d by the Court or my
Signature of Participant			Date	
Signature of PSO			Date	